



# Park District Of Oak Park

## ATHLETIC FIELD/COURT PERMIT APPLICATION

218 Madison St  
Oak Park, IL 60302  
(708) 725-2721 (info)  
(708) 383-5702 (fax)  
permits@oakparkparks.com  
www.oakparkparks.com

**INSTRUCTIONS:** Please complete and submit this application for review to the location listed above at least 4 weeks prior to the date of your event. Incomplete applications will be denied.

**PLEASE NOTE:** This form is a "request" and does not serve as the actual permit. All applications must be approved by the Park District. Once approved, you will receive a copy of your approved permit application via e-mail. You can expect to receive a response regarding your application within 10 business days after it has been submitted. Park District of Oak Park begins accepting permit applications on April 1 for events taking place May 1—October 15 of the same year.

### APPLICANT INFORMATION

EVENT CONTACT		ORGANIZATION /GROUP NAME (if applicable)	
STREET ADDRESS			
CITY		STATE	ZIP
DAYTIME PHONE	FAX	CELL PHONE	
E-MAIL ADDRESS		SIGNATURE (By signing below, I agree to follow Park District Rules & Regulations Governing Uses of Park Facilities.)	

### EVENT INFORMATION

TYPE OF ACTIVITY OR SPORT	AGE OF PARTICIPANTS (check all that apply) <input type="checkbox"/> 5 & Under <input type="checkbox"/> 6-12 <input type="checkbox"/> 13-17 <input type="checkbox"/> Adult	NUMBER OF INDIVIDUALS ATTENDING
FIELDS/COURTS WILL BE USED FOR (check all that apply) <input type="checkbox"/> Practices <input type="checkbox"/> Games <input type="checkbox"/> Tournaments <input type="checkbox"/> Open Play <input type="checkbox"/> Other (Please specify):		
EVENT DESCRIPTION (Provide a detailed description of your event, including any equipment such as tables, chairs, pop-up tents, etc. that will be brought in. Documents with this information may be attached.)		

SPECIAL REQUESTS (subject to availability; will result in additional fees)

Restrooms    Lights    Electricity    Water    Other (Please specify):

### LOCATION REQUESTS

PARK REQUESTED	FIELD(S)/COURT(S) NEEDED	START DATE	END DATE	DAYS OF THE WEEK	TIME
		/ /	/ /	M TU W TH F SA SU	
		/ /	/ /	M TU W TH F SA SU	
		/ /	/ /	M TU W TH F SA SU	
		/ /	/ /	M TU W TH F SA SU	
		/ /	/ /	M TU W TH F SA SU	
		/ /	/ /	M TU W TH F SA SU	

### FOR OFFICE USE ONLY

Received by: \_\_\_\_\_ on: \_\_\_\_\_ at: \_\_\_\_\_ Reservation #: \_\_\_\_\_ Confirmation Sent: \_\_\_\_\_  
(Initials) (Date) (Time) (Date)

NOT VALID  
WITHOUT STAMP

